

Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

UNITED STATES DISTRICT COURT

for the

Eastern District of Pennsylvania

Civil Division

MONICEN PINNOCK

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

UNIVERSITY OF PENN at CEDAR

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Case No. _____

*(to be filled in by the Clerk's Office)*Jury Trial: (check one) ☒ Yes ☐ No

COMPLAINT FOR A CIVIL CASE

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	MONICEN PINNOCK
Street Address	5221 Delancey st
City and County	Philadelphia
State and Zip Code	PA 19143
Telephone Number	2675822696
E-mail Address	monica.p9365@gmail.com

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (*if known*). Attach additional pages if needed.

Defendant No. 1

Name _____

Job or Title (*if known*) _____

Street Address _____

City and County _____

State and Zip Code _____

Telephone Number _____

E-mail Address (*if known*) _____**Defendant No. 2**

Name _____

Job or Title (*if known*) _____

Street Address _____

City and County _____

State and Zip Code _____

Telephone Number _____

E-mail Address (*if known*) _____**Defendant No. 3**

Name _____

Job or Title (*if known*) _____

Street Address _____

City and County _____

State and Zip Code _____

Telephone Number _____

E-mail Address (*if known*) _____**Defendant No. 4**

Name _____

Job or Title (*if known*) _____

Street Address _____

City and County _____

State and Zip Code _____

Telephone Number _____

E-mail Address *(if known)* _____**II. Basis for Jurisdiction**

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal court jurisdiction? *(check all that apply)*

☒ Federal question

☐ Diversity of citizenship

Fill out the paragraphs in this section that apply to this case.

A. If the Basis for Jurisdiction Is a Federal Question

List the specific federal statutes, federal treaties, and/or provisions of the United States Constitution that are at issue in this case.

5th amendment, 14th amendment,

B. If the Basis for Jurisdiction Is Diversity of Citizenship**1. The Plaintiff(s)****a. If the plaintiff is an individual**

The plaintiff, *(name)* Monicen Pinnock, is a citizen of the State of *(name)* _____.

b. If the plaintiff is a corporation

The plaintiff, *(name)* _____, is incorporated under the laws of the State of *(name)* _____, and has its principal place of business in the State of *(name)* _____.

(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)

2. The Defendant(s)**a. If the defendant is an individual**

The defendant, (name) _____, is a citizen of
the State of (name) _____. Or is a citizen of
(foreign nation) _____.

b. If the defendant is a corporation

The defendant, (name) _____, is incorporated under
the laws of the State of (name) _____, and has its
principal place of business in the State of (name) _____.
Or is incorporated under the laws of (foreign nation) _____,
and has its principal place of business in (name) _____.

(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)

3. The Amount in Controversy

The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest and costs of court, because *(explain)*:

\$100,000.00 plaintive request the court to enter an order for defendants to remit payment in the amount of \$100,000 for compensation your pain and suffering mental pain and anguish and psychological damage and any such other relief that the court deems just and proper

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

T this case begins with a trip to the emergency room of University of Pennsylvania hospital at cedar. Once there a series of tests were taken some of those tests were lab tests and suddenly your plaintiff miss pennock received a call from the Center for Disease Control informing miss pinnock that they had bad news. She had to come in when she got there she began crying uncontrollably because they. told her that her test came back positive. She ensured it was an error as she just recently gave birth. However they Antiviral medication to her pharmacy. For two days she sat with her partner discussed the news wouldnt eat or sleep. CDC called and told her that the viral load test was low and that it was negative despite the news Plaintiff went in a downwrad spiral. May 20th plaintive went to see PCP doctor her weight was 140 plaintiff lost over 140 lbs. Doctor Pinto prescribed Seroquel for insomnia ,weight lost and physcological issues. Since September 14th 2023 plaintive has mental impact from this incident she will never be able 2 donate blood even though phlebotomy and direct care is her career of choice. No one knows what plaintiff battles with daily sexually mentally and suicidally. Plaintiff was never given a reason as to why the mishap had happened weather lab error or tech error she is just scarred for life.

IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

plaintive request the court to enter an order for defendants to remit payment in the amount of \$100,000 for compensation your pain and suffering mental pain and anguish and psychological damage and any such other relief that the court deems just and proper

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 03/01/25

Signature of Plaintiff

Printed Name of Plaintiff

Monica Pinnock
Monica Pinnock

B. For Attorneys

Date of signing: 03/01/25

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Street Address

Pro Se 1 (Rev. 12/16) Complaint for a Civil Case

State and Zip Code

Telephone Number

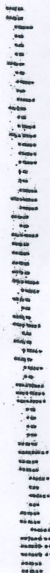
E-mail Address

Monica Pinneck
5221 Delancey St
Philadelphia, PA 19143

RECEIVED
APR - 7 2025

United States District Court
601 Market St
Philadelphia, PA 19106

1910681729 0019



U.S.M.S.
X-RAY

UNITED STATES
POSTAL SERVICE

RDC 99

19106

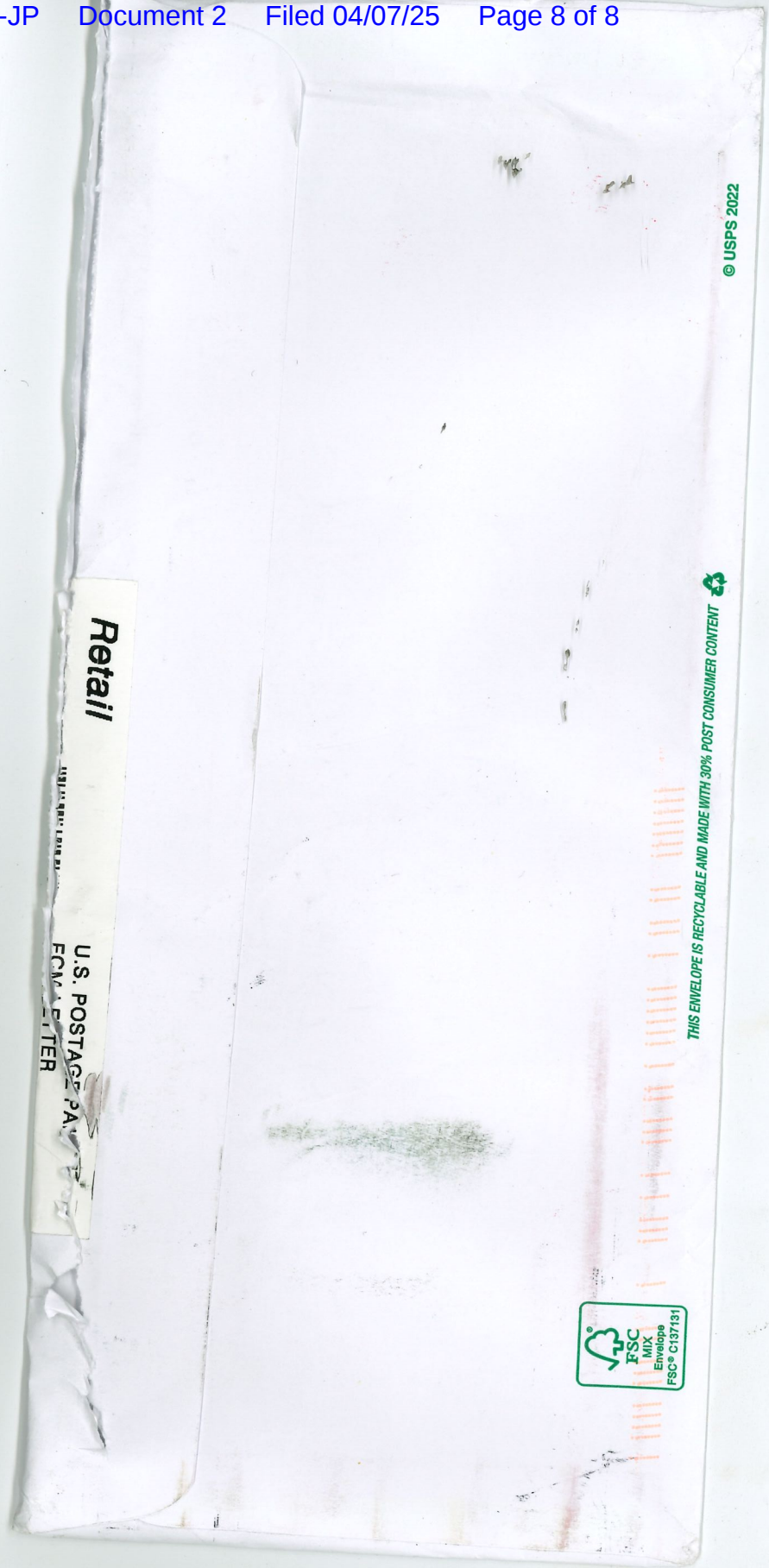
PHILADELPHIA, PA 19139
APR 04, 2025

\$0.28

S2324H503095-02

FOREVER / USA





Retail

U.S. POSTAGE PAID PER
PERMIT NO. 1000
NEW YORK, NY 10001



THIS ENVELOPE IS RECYCLABLE AND MADE WITH 30% POST CONSUMER CONTENT

© USPS 2022